



# LOS ANGELES COUNTY COMMISSION ON HIV

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*While not required of meeting participants, signing-in constitutes public notice of attendance. Presence at meetings is recorded solely based on sign-in sheets, and not signing-in constitutes absence for Commission members. Only members of the Commission on HIV are accorded voting privileges, thus Commissioners who have not signed in cannot vote. Sign-in sheets are available upon request.*

## PRIORITIES AND PLANNING (P&P) COMMITTEE MEETING MINUTES

August 4, 2009

**Approved**  
**9/1/2009**

MEMBERS PRESENT	MEMBERS ABSENT	PUBLIC	PUBLIC, CONT.	HIV EPI AND OAPP STAFF
Jeffrey Goodman, <i>Co-Chair</i>	Douglas Frye	Vanessa Cardona	Lee Kochems	Kyle Baker
Kathy Watt, <i>Co-Chair</i>		Pamela Chiang	Anita Le	Juhua Wu
Anthony Braswell		Phil Curtis	Miguel Martinez	
Robert Butler		Whitney Engeran-Cordova	Leland Morroh	
Fredy Ceja		Miguel Fernandez	Ruel Nolleto	COMM STAFF/ CONSULTANTS
Michael Green		Susan Forrest	Trip Oldfield	
Bradley Land		David Giugni	Jenny O'Malley	Julie Cross
Ted Liso		Terry Goddard	Scott Singer	Jane Nachazel
Anna Long		Paul Hebblethwaite	Terry Smith	Glenda Pinney
Quentin O'Brien		Philip Hendricks	Brigitte Tweddell	Craig Vincent-Jones
		Tonya Hendricks	Silvia Valerio	Nicole Werner
		Miki Jackson	Yvette Wells	
		AJ King		

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- 2) **Table:** State of California AIDS/HIV Program Funding Detail, Department of Public Health (DPH) and Department of Health Care Services (DHCS), 2009 Budget Act, 7/28/2009
- 3) **Memorandum:** Sacramento Update, State Budget Update, 7/30/2009
- 4) **Spreadsheet:** Grant Year 19 Ryan White Part A & B Expenditures by Service Categories as of June 30, 2009, 8/4/2009
- 5) **Summary Key:** Year 18 Ryan White Part A & B Expenditures by Service Category, *on-going*
- 6) **Spreadsheet:** Grant Year 2 Ryan White Minority AIDS Initiative (MAI) Expenditures and Year 1 Carry Over by Service Categories as of May 31, 2009, 8/4/2009
- 7) **Definitions:** Fiscal Year 2010 Priority- and Allocation-Setting Paradigms and Operating Values, 4/7/2009
- 8) **Summary:** Consumer Caucus Summary, 5/14/2009
- 9) **Summary:** California HIV Insurance Continuation Options, 5/5/2009
- 10) **Table:** County of Los Angeles – Department of Public Health, Office of AIDS Programs and Policy, Fiscal Year 2009-2010 Funding Adjustments, (State 08/09 Funding), 8/4/2009
- 11) **Table:** County of Los Angeles – Department of Public Health, Office of AIDS Programs and Policy, Fiscal Year 2009-2010 Funding Adjustments, (OAPP, Service Category Preservation or Partial Restoration), 8/4/2009
- 12) **Table:** County of Los Angeles – Department of Public Health, Office of AIDS Programs and Policy, Fiscal Year 2009-2010 Funding Adjustments, (OAPP, Adjustments and Additional Potential Funding), 8/4/2009
- 13) **Memorandum:** FY 2009 Ryan White Program Part A Award Increase and Part B Allocations, 5/21/2009
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1. **CALL TO ORDER:** Mr. Goodman called the meeting to order at 1:50 pm and attendees related their conflicts of interest.
2. **APPROVAL OF AGENDA:**  
**MOTION #1:** Approve the Agenda Order (*Passed by Consensus*).
3. **APPROVAL OF MEETING MINUTES:**  
**MOTION #2:** Approve the Priorities and Planning (P&P) Committee Meeting Minutes (*Postponed*).
4. **PUBLIC COMMENT, NON-AGENDIZED:** There were no comments.
5. **COMMISSION COMMENT, NON-AGENDIZED:** There were no comments.
6. **PUBLIC/COMMISSION COMMENT FOLLOW-UP:** There was no follow-up.
7. **CO-CHAIRS' REPORT:** This meeting is to develop recommendations for FY 2009 revisions for approval at the 8/13/2009 Commission meeting.
8. **FY 2008/2009 EXPENDITURES:** This item was postponed.
9. **FY 2009 PRIORITY- AND ALLOCATION-SETTING:**
  - A. **Benefits Specialty Report from OAPP:** This item was postponed.
  - B. **Allocations:**
    - Mr. Vincent-Jones said the Commission has a verbal agreement with DPH to offer input on all funding resources.
    - Dr. Green reported State cuts are retroactive to 7/1/2009, resulting in about \$31,000 per day or \$1 million per month in unreimbursable contract expenditures. Final State Master Grant Agreement figures have not yet been released. The State could choose not to allocate any of the \$4+ million in Part B funds to the County based on OAPP direct receipt of some CDC HIV Counseling/Testing funds, but the County, San Francisco, HRSA and CDC have spoken against that.
    - Total estimated OAPP State General Fund budget reductions are \$11,547,918 from: Health Education/Risk Reduction (HE/RR), \$5,353,536; Counseling and Testing, \$1,101,259; Therapeutic Monitoring Program (TMP), \$3,000,000; and Early Intervention Programs (EIP), \$2,093,918.
    - Figures do not show cuts to the complex mix of non-OAPP State HIV resources, e.g., seven agencies with Case Management (CM), Home-Based lost all \$2 million in direct State funding, but six receive OAPP non-State resources. There are cuts of \$300,000+ in direct State-funded EIP, and cuts to non-HIV-specific programs used by clients like \$15 million to ADPA.
    - OAPP has engaged in contingency planning for months, including with other Public Health divisions and in overall County planning. OAPP discussed proposals with the Prevention Planning Committee (PPC) Executive Subcommittee and will present at the next full PPC.
    - OAPP recommended full funding preservation for: CM, Home Based; CM, Medical; CM, Transitional; HIV Counseling/Testing; Hospice; Language/Interpretation; Medical Outpatient (MO); Medical Specialty; Mental Health (MH), Psychiatry; Nutrition Support; Oral Health (OH); Residential Services; and Substance Abuse.
    - OAPP is working with HOPWA to identify possible duplicate services for future savings from overlapping expenses.
    - No cuts are recommended for oral health until effects of new resources and the impact from the elimination of Denti-Cal can be properly assessed and understood.
    - Recommendations take into account related issues, such as: lack of alternate Hospice resources; psychiatrist retention issues for MH, Psychiatry; addressing post-incarcerated unmet need with CM, Transitional; and stemming the CDC-reported 70% of new infections resulting from the undiagnosed with HIV Counseling/Testing.
    - OAPP recommended partial funding restoration of: 80% of HE/RR (\$4.3 million) starting with contracts effective 10/1/2009; 48% of EIP (\$1 million) by consolidating and merging the existing three contracts; and 75% of TMP (\$2.2 million) based on reducing viral loads for stable clients from four to two or three annually, with clinician approval and allowing providers to select the most cost effective laboratories.
    - OAPP recommended reductions or elimination of funding to services based on what is essential to health status and quality of life, other resources and services no longer as needed due to the HIV care shift to a chronic disease model.
    - Amounts are by category. Due to mid-year adjustment, about half of annual funds listed will be expended before contract adjustments are made. State reductions are on a 7/1-6/30 cycle, but OAPP contracts are not.

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- Recommended reductions are:

Service Category	FY 19 Contracts	Recommendations/Rationale
Legal Services <sup>1</sup>	(\$370,433) *	End contract to fund essential services.
Peer Support <sup>1</sup>	(\$404,965) *	End contract to fund essential services.
Provider Training <sup>1</sup>	(\$168,888)	End contract to fund direct services. Training can be provided in-house.
Capacity Building <sup>1</sup>	(\$600,000) *	End contracts to fund direct services.
Client Advocacy <sup>1</sup>	(\$242,000) *	Cut contract by 50%; maintain HIV/LA online directory.
Social Marketing	(\$800,000) *	Cut by at least 50%. Not a direct service provider. Determine what KCBS can do with reduced award.
Treatment Education <sup>1</sup>	(\$1,451,895) *	Reduce services by 34%. Service category not allocated by Commission for YR 20.
Medical Nutrition Therapy <sup>1</sup>	(\$326,871) *	End contracts and fold services into MO contracts with no funding adjustment.
Case Management, Psychosocial <sup>1</sup>	(\$800,000)	Eliminate the NCC-funded amount.
Transportation <sup>1</sup>	(\$200,000)	Implement client eligibility rules consistent with Federal poverty guidelines effective 10/1/2009. Only provide bus passes to MO providers.
Mental Health, Psychotherapy <sup>1</sup>	(400,000) *	Cut by 20%.
Community Mobilization Initiative (CMI)	(\$220,000) *	Indefinite postponement of RFP.
<b>Total Funding Cuts</b>	<b>(\$5,985,052)</b>	<b>12-month adjusted available funds to preserve essential services affected by State cuts.</b>

<sup>1</sup> Contract/funding terms cross fiscal years, therefore funding adjustments do not reflect expenditures prior to 7/1/2009.

\* Indicates full contract amount for a 12-month period.

- \$4.4 million identified in additional funds for the preservation of services: \$1 million, YR 19 Part A increase; \$2.9 million, OAPP and Commission operational and administrative budget cuts; \$500,000, shift of FY 2009 Part A Oral Health costs to the Minority AIDS Initiative rollover.
- The OAPP recommendation to cut MH, Psychotherapy 20% raised concerns as it is a core medical service ranked 8. Under-spending in FYs 2007 and 2008 was about 10%, but this service supports adherence, especially in low-income clients, and the category will be stressed by significant cuts to non-HIV-specific MH funding.
- The MO Scope of Work includes an annual Medical Nutrition Therapy assessment and six-month reassessment, but cutting funds makes it an unfunded mandate. Many physicians find it not needed by all clients, so services might be reduced by targeting while maintaining education. HRSA has no requirement. Standards use Public Health guidelines.
- There was concern about cutting NCC for CM, Psychosocial though the Ryan White allocation remains intact.
- There was concern about restricting Transportation to MO providers as clients access care through different points of entry. It was noted that other funding support like Medi-Cal and IHSS are being reduced, making services like this and CM, Home-based more critical.
- Shifting all Social Marketing funds to other services was suggested as was revising it to enhance the continuum of care.
- ➡ Agreed to extend the meeting to 5:00 pm and meet 8/5/2009, 1:30 to 4:30, 8<sup>th</sup> Floor to complete recommendations.
- ➡ Mr. Oldfield, HALSA, said some two-thirds of Legal Services help connect clients to benefits – one-third in securing benefits and one-third in immigration work to qualify clients for benefits. Data was requested for the 8/5/2009 meeting.

10. **FY 2010 PRIORITY- AND ALLOCATION-SETTING:** This item was postponed.

11. **NEXT STEPS:** This item was postponed.

12. **ANNOUNCEMENTS:** There were no announcements.

13. **ADJOURNMENT:** The meeting was adjourned at 4:50 pm.